



## UNITED STATES DE

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	APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCK	ET NO./TITLE
	08/929,462	09/15/97 Bi	ERGLUND	М	024444-4
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			ING PARTS OF APPLICATION  Date Granted	ON	
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⊒ <b>2</b> .	Additional claim fees of \$_ Applicant must either subn	it the additional claim fees	ling any multiple dependent clain or cancel additional claims for wh	n fees, are required. nich fees are due.	
	☐ does not include the ci An oath or declaration in c the above Application Nun	oplication to which it applies ty and state or foreign count ompliance with 37 CFR 1. 6 onber and Filing Date is requi	try of applicant's residence. 3, including residence information	n and identifying the	application by
<b>3</b> 4.	The signature(s) to the oath missing.  by a person other than A properly signed oath or a Application Number and F	inventor or person qualified declaration in compliance wi	I under 37 CFR 1.42, 1.43, or 1.4 ith 37 CFR 1.63, identifying the a	17. pplication by the abo	ove
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